CENTRAL STATE HOSPITAL LOCAL HUMAN RIGHTS COMMITTEE MEETING MINUTES

Central State Hospital
26317 W. Washington Street
Building 113, Main Conference Room
Petersburg, Virginia 23803
February 1, 2008
8:30 am Regular Meeting

Attendance:

Violet Hite, Chair; Member; Jane Clayborne, Vice-Chair; Linda Masri, Member; and Isabel Vartanian, Member.

Guests:

Jennifer Barker, CSH Director of Patient Relations; Ronald Forbes, M.D., CSH Medical Director; Jim Bell, Forensic Director/CSH; Carrie Flowers, Human Rights Advocate/Office of Human Rights; Michael Curseen, Human Rights Advocate/Office of Human Rights; Ansley Perkins, Human Rights Advocate/Office of Human Rights; Dr. Donna Moore, Director of Psychology/CSH; Gloria Morman, RNCB/CSH; Michael Shelton, Forensic Training Coordinator; Randi Key, LHRC applicant; Rebecca Currin, VOPA; and Rose Mitchell, Executive Secretary/Office of Human Rights.

Absent: Chana Ramsey, LHRC Member; Dr. Charles Davis, Hospital Director/CSH

- I. Call to Order: 8:32 am
- II. Minutes of December 7, 2007 Meeting

The minutes were approved as presented.

III. Public Comment:

None

- IV. New Business
 - **A.** Monthly Variance Report for December 07 & January 08 Presented by Jim Bell, Forensic Unit Director

Mr. Bell reported that there were no reportable incidents involving the four approved forensic variances during the months of December 2007 and January 2008.

Action: The Committee approved a motion to accept Mr. Bell's report.

(Executive Session)

The committee approved a Motion to move into Executive session pursuant to VA Code 2.2-3711 (A), Paragraph 15, for the protection of the privacy of individuals and their records in personal matters not related to public business.

The following subject matters were discussed in Executive Session:

Monthly Abuse Summaries – November and December 2007
Formal Human Rights Complaints – December 07 and January 08
Aggression Management Plans
Spit Guard Usage – December 07 and January 08
CSH Follow-Up – January 11, 2008 Fact-Finding Conference
LHRC Follow-Up – Seeking a Variance for Aggression Management Plans
LHRC Applicant for Membership to the CSH LHRC

(Return to Open Session)

Upon reconvening in open session, the Central State Hospital Local Human Rights Committee certified that to the best of each member's knowledge, only public business matters lawfully exempt from statutory open meeting requirements, and only public business matters identified in the motion to convene the closed session were discussed in closed session

B. Monthly Abuse Summary: November and December 2007 – Presented by Jennifer Barker

Action: The LHRC approved a motion to accept Mrs. Barker's report.

C. Formal Human Rights Complaints – December 07 and January 08 – Presented by Jennifer Barker

Action: The Committee approved a motion to accept Mrs. Barker's report.

D. <u>Hospital's Review of Aggression Management Plans</u> - Presented by Dr. Donna Moore, Director of Psychology

Dr. Moore explained to the Committee the history of obtaining Aggression Management Plans (AMP). Needs arose for these plans when patients and staff were being physically harmed by other patients. AMPs are developed for patients who display a pattern of aggression and who have identifiable predictors of behavior. The plan outline is divided into three stages as follows: A (Anxiety), B (Bold, Belligerent) and C (Crisis). There are currently 9 patients who have an AMP and of these 9 plans, only 3 are actually in use.

After much discussion Dr. Moore stated that CSH will have the patient sign off on the AMP and if problems arise from this, a clinical justification to restrict a patient's participation in the development of the AMP.

Action: The Committee approved a motion to review monthly all new

AMP and any AMP that reaches the "C" (Crisis) stage. A monthly written report from Dr. Moore will be acceptable and Mrs. Barker will present this as a standing report each month. The Committee also requested a progress update report from Dr. Moore in 6 months (August).

E. <u>Spit Mask Usage – December 07 and January 08</u> – Presented by Michael Curseen

Mr. Curseen reviewed the spit mask data and reported that the spit masks appeared to be used appropriately during the months of December 2007 and January 2008.

Action: The LHRC approved a motion to accept Mr. Curseen's report.

F. <u>LHRC Policy Review: Seclusion or Restraint, Emergency #CP-74j – presented by Jennifer Barker</u>

Mrs. Barker presented the Seclusion/Restraint Emergency plan for review and approval to the LHRC. According to Mrs. Barker, the only significant change to this plan included the addition of a new restraint chair device. The purpose of the restraint chair is to provide an intermediate level of restriction which is more restrictive than ambulatory restraints but less restrictive than non-ambulatory (bed) restraints

Mrs. Barker introduced Mr. Shelton and Ms. Morman to the LHRC to demonstrate the emergency restraint chair and indicated that this chair is currently in use at Western State Hospital. Ms. Clayborne, LHRC member volunteered to be restrained. This chair is designed to accommodate patients who are head bangers. A patient would be transferred from 4 pt. ambulatory restraints to the restraint chair and a physician's order would still be required to authorize the use of this chair. The order for a chair restraint may not continue beyond 2 hours. If the chair restraint is required beyond the 2 hour period, a new physician's order would be required.

Action: The Committee approved a motion to approve the restraint policy as presented.

G. LHRC Application for Membership: Ms. Randi Key

The Committee interviewed Ms. Key for membership to the LHRC.

Action: The Committee approved a motion to recommend Ms. Randi Key's membership application request to the State Human Rights Committee for appointment to the CSH LHRC.

H: <u>CSH Follow-up of the January 11, 2008 Fact Finding Conference</u> – presented by Mrs. Barker

Mrs. Barker told the Committee that CSH has accepted all of the Committee's recommendations. Also, on January 29, 2008, the findings were discussed with A.T. and Ms. Flowers was present at this meeting. Mrs. Barker stated that all staff will be given training on how to properly marks thru items in a patient's record and all employees will receive orientation from their supervisors on the importance of initialing and dating any changes made to existing records documentation. To further emphasize this, Mrs. Barker and Ms. Parham, Director of Nursing will conduct random chart reviews to check on the on-going progress of this implementation. Ms. Flowers shared that A. T. may appeal the LHRC's decision and request an appeal before the State Human Rights Committee.

Action: The Committee accepted Mrs. Barker's follow-up of the LHRC's recommendations for Central State Hospital.

V. Follow-up Business

LHRC Follow-up RE: Opinion from State Human Rights Director
 Concerning Necessity of Seeking a Variance Regarding Hospital's Practice of Denying Patient's the Right to Participate Meaningfully in the Preparation of an Aggression Management Plan – Presented by Mr. Curseen

Mr. Curseen sought Margaret Walsh's (Director of Human Rights) opinion on whether the Rules and Regulations require the hospital to allow patients to meaningfully participate in the development of AMPs and whether a variance to the Rules and Regulations would be required if the hospital chooses not to allow patient participation. Ms. Walsh stated that since AMPs are part of the master treatment plan and section 12VAC35-115-70, B.1-3 of the Rules and Regulations require providers to give patients the opportunity to participate meaningfully in all aspects of services affecting him, her recommendation is for the hospital to seek permission to obtain a Variance.

Dr. Moore, Director of Psychology, agreed to allow patients sign to participate meaningfully in the development of their AMP and if individual problems do arise, the hospital will consider implementing individualized restrictions as the need arises.

Action: The Committee approved a motion to accept Mr. Curseen's report.

LHRC Follow-up: <u>Update Regarding the Implementation of the Hospital's Satisfaction Survey RE: Inadequate Housekeeping Services Provided in the Forensic Unit – Building 39</u> – Presented by Mrs. Barker

The Committee accepted a request by Ms. Barker to defer discussion of this item to the March 2008 LHRC meeting.

3. <u>LHRC Follow-up: Comparison of HDMC Data for Dental</u>
<u>Extractions and Dental Restorations for CSH Patients Covering</u>
<u>Previous 12 Months</u> – Jennifer Barker, Director of Patient Relations

Since CSH patients are now being sent into the community for their dental work and since Dr. Stevens', caseload at Hiram Davis is limited to serving SVTC patients (CSH patients are seen on an emergency basis only) the request for an update from HDMC concerning the # of extractions performed on CSH patients referred to HDMC for dental work is not feasible at this time. Dr. Forbes stated that this has been an ongoing problem and that are contracting with dentists in the community to see CSH patients. Dr Forbes shared the process for arranging community referrals is slow although the care received seems to be satisfactory.

Action: The Committee approved a motion to table this item and will revisit this issue if concerns arise, again.

VI. Director's Comments:

In Dr. Davis' absence, Dr. Forbes told the Committee that the budget is a major concern and trying to meet the budget. Also, there are re-organizations of mental health clinics, mental health services in jails and that medical illness are more prevalent than before with major medical illness.

VII. VOPA Comments

Mr. Curseen presented Becky Currin, VOPA, to the Committee. Ms. Currin gave a brief introduction of herself and acknowledged the Committee for focusing on the same issues as VOPA. Ms. Currin addressed the issue that restricting incoming phone calls from their families, lawyers, and CSBs is a violation of their human rights. Ms. Currin stated that the issue discussed regarding AMPS is being studied by her office in relationship to a patient who recently died during the implementation of an AMP. Finally, Ms. Currin voiced her agency's support of the LHRC's opinion that failure to report abuse constitutes an allegation of neglect and indicated that VOPA intends to pursue this issue further. Ms. Currin thanked the Committee and hopes to come on a regular basis to our meetings.

VIII. Adjournment: 11:48 A.M. Next Meeting Date: March 7, 2008